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PTO/SB/22 (07-09)

Approved for use through 07/31/2012. OMB 0651-0031

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<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b> <b>- FY 2009</b> (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		<b>Docket Number (Optional)</b> 06290/0204400-USO	
<b>Application Number</b> 10/596,077-Conf. #1522		<b>Filed</b> August 4, 2006	
<b>For</b> PROCESS FOR RECOVERING POLYHYDROXIALKANOATES ("PHAS") FROM CELLULAR BIOMASS			
<b>Art Unit</b> 1654		<b>Examiner</b> M. A. Audet	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
	<b>Fee</b>	<b>Small Entity Fee</b>	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$130	\$65	\$
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$490	\$245	\$ 245.00
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1110	\$555	\$
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1730	\$865	\$
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2350	\$1175	\$
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
<input type="checkbox"/> A check in the amount of the fee is enclosed.			
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			
<input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 04-0100			
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>			
I am the <input type="checkbox"/> applicant/inventor.			
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			
<input checked="" type="checkbox"/> attorney or agent of record. Registration Number 44,528			
<input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34			
_____ Signature		_____ Date	
Thomas J. Bean		(212) 527-7700	
Typed or printed name		Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input checked="" type="checkbox"/> Total of 1 forms are submitted.			

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